PTO/SB/05 (03-01) Approved for use through 10/31/2002. OMB 0651-0032

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## UTILITY **PATENT APPLICATION TRANSMITTAL**

Attorney Docket No. First Inventor		Cth1	5 P
		Samuel Shiber	s. 646
Title	Thrombecto	my Catheter	2 c 708

(Only for new nonprovision	al applications under 37 CFR 1.53(b))	Expres	s Mail Label No.	EM50475	5072	sus 哥	
APPLICATION ELEMENTS			ADDRESS TO: Assistant Commissioner for Patents Box Patent Application				
	erning utility patent application conten	ts.		Washington, [	OC 202	31	
1. (Submit an original and a d	orm (e.g., PTO/SB/17) hyplicate fur fee processing) mall entity status.	7.	Computer Program (Appendix)				
2. See 37 CFR 1.27.			cleotide and/or Amin applicable, all neces		nce Su	omission	
3. Specification [Total Pages 14 ]			a. Computer Readable Form (CRF)				
- Descriptive title		b.	b. Specification Sequence Listing on:				
<ul> <li>Cross Reference to Related Applications</li> <li>Statement Regarding Fed sponsored R &amp; D</li> </ul>			i. CD-ROM or CD-R (2 copies); or				
- Reference to sequence listing, a table,			ii. paper				
or a computer program listing appendix - Background of the Invention			Statements ve	rifying identity	of abo	ve copies	
	n of the Drawings (if filed)		ACCOMPANYIN	IG APPLIC	ATIO	N PARTS	
- Detailed Descrip - Claim(s)	ption	9.	Assignment Pa		neet & d		
- Abstract of the	Disclosure	10.	37 CFR 3.73(b (when there is			Power of Attorney	
4. V Drawing(s) (35 U.S.C. 113) [ Total Sheets 4 ]			11. English Translation Document (if applicable)				
5. Oath or Declaration	[Total Pages 2	j 12.	12. Information Disclosure Statement (IDS)/PTO-1449 Copies of IDS Citations				
a. Newly executed (original or copy) Copy from a prior application (37 CFR 1.63 (d))			13. Preliminary Amendment				
b. (for continual	14.	(Should be specifically iterffized)					
i. <u>DELET</u>	15. Certified Copy of Priority Document(s) (if foreign priority is claimed)						
named in t	he prior application, see 37 CFR and 1.33(b).	16.	Nonpublication (b)(2)(B)(i). Ap			J.S.C. 122 orm PTO/SB/35	
6. Application Data	Sheet. See 37 CFR 1.76		or its equivale				
		17.	Other:				
18. If a CONTINUING APPLI or in an Application Data She	CATION, check appropriate box, and a set under 37 CER 1.76	supply the req	uisite information be	low and in a p	relimin	ary amendment,	
Continuation	Divisional Continuation-in-part (C	CIP)	of prior application No.:	/			
Prior application information:	Examiner:			Unit:			
Box 5b, is considered a part of	ONAL APPS only: The entire disclosure f the disclosure of the accompanying co	ntinuation or d	visional application a	ind is hereby in	corpor	is supplied under ated by reference.	
The incorporation can only be	relied upon when a portion has been ina 19. CORRESPO		<del></del>	a application p	arts.		
Customer Number or Bar Code Label  Correspondence address below  Correspondence address below							
Name	Samuel Shiber						
365 Kearney Circle 30608							
Address							
City	Manchester	State NH Zip Code 03104			03104		
Country	USA	Telephone	603 644-177	3 Fa	x	644-1776	
Name (Print/Type)	Samuel Shiber	Reg	gistration No. (Atto	rney/Agent)			
Signature	Songling	/		Date	03/0	1/2002	

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## **FEE TRANSMITTAL** for FY 2002

Patent fees are subject to annual revision.

**TOTAL AMOUNT OF PAYMENT** 

0.	00
	0.

DECITE IS & CONGORDAL OF MILE	material allege it displays a valid strip control harriss		
Complete if Known			
Application Number			
Filing Date			
First Named Inventor	Samuel Shiber		
Examiner Name			
Group Art Unit			
Attorney Docket No.			

	METHOD OF PAYMENT	FEE CALCULATION (continued)					
Ţ.	1.  The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:	3. ADDITIONAL FEES					
	Deposit Deposit	Large Small Entity Entity					
- 1	Account Number 19-2040	Fee Fee Fee Fee Description	Fee Paid				
	Deposit Account Samuel Shiber	Code (\$) Code (\$)  105 130 205 65 Surcharge - late filling fee or oath					
	Name Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17	127 50 227 25 Surcharge - late provisional filing fee or cover sheet					
	Applicant claims small entity status.	139 130 139 130 Non-English specification					
-	See 37 CFR 1.27  2. Payment Enclosed:	147 2,520 147 2,520 For filing a request for ex parte reexamination					
	2. Payment Enclosed: Check Credit card Money Order Other	112 920* 112 920* Requesting publication of SIR prior to Examiner action					
Series -	FEE CALCULATION	113 1,840* 113 1,840* Requesting publication of SIR after Examiner action					
Sales -	1. BASIC FILING FEE	115 110 215 55 Extension for reply within first month					
Ü	Large Entity Small Entity	116 400 216 200 Extension for reply within second month					
M	Fee Fee Fee Fee Description	117 920 217 460 Extension for reply within third month					
gur grifter	Code (\$) Code (\$) Fee Paid  101 740 201 370 Utility filing fee 370,00	118 1,440 218 720 Extension for reply within fourth month					
	106 330 206 165 Design filing fee	128 1,960 228 980 Extension for reply within fifth month					
(M	107 510 207 255 Plant filing fee	119 320 219 160 Notice of Appeal					
<i>g</i>	108 740 208 370 Reissue filing fee	120 320 220 160 Filing a brief in support of an appeal					
n stat.	114 160 214 80 Provisional filing fee	121 280 221 140 Request for oral hearing					
		138 1,510 138 1,510 Petition to institute a public use proceeding					
	SUBTOTAL (1) (\$) 370.00	140 110 240 55 Petition to revive - unavoidable					
i de	2. EXTRA CLAIM FEES	141 1,280 241 640 Petition to revive - unintentional					
**************************************	Fee from Ext <u>ra Claims below Fee Paid</u>	142 1,280 242 640 Utility issue fee (or reissue)					
**** 1	Total Claims 14 -20** = 0 X = 0.00	143 460 243 230 Design issue fee					
727	Independent 3 - 3** = 0 X = 0.00	144 620 244 310 Plant issue fee					
1	Multiple Dependent ≈ 0.00	122 130 122 130 Petitions to the Commissioner					
1		123 50 123 50 Processing fee under 37 CFR 1.17(q)					
	Large Entity Small Entity Fee Fee Fee Fee Fee Description	126 180 126 180 Submission of Information Disclosure Stmt					
- 1	Code (\$) Code (\$) 103 18 203 9 Claims in excess of 20	581 40 581 40 Recording each patent assignment per property (times number of properties)					
İ	102 84 202 42 Independent claims in excess of 3	146 740 246 370 Filing a submission after final rejection (37 CFR § 1.129(a))					
	104 280 204 140 Multiple dependent claim, if not paid	149 740 249 370 For each additional invention to be					
1	109 84 209 42 ** Reissue independent claims over original patent	examined (37 CFR § 1.129(b))					
	110 18 210 9 ** Reissue claims in excess of 20 and over original patent	179 740 279 370 Request for Continued Examination (RCE)					
	and over original patent	169 900 169 900 Request for expedited examination of a design application					
- 1	SUBTOTAL (2) (\$) 0.00	Other fee (specify)					
1	**or number previously paid, if greater, For Reissues, see above	*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 0	0.00				

SUBMITTED BY				Complete (if applicable)		
Name (Print/Type)	Samuel Shiber	Registration No. (Attorney/Agent)		Telephone	603 644-1773	
Signature	SanShiler			Date	03/01/2002	

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## IN THE UNITED STATES PATENT & TRADEMARK OFFICE

## CERTIFICATE OF MAILING My docket No: Cth1

Assistant Com. of Patents Washington D.C. 20231

Sir:

I hereby certify that this application is being mailed to the Assistant Commissioner of Patents, Washington D.C. 20231 on the date shown below by Express Mail Post Office To Addressee, label No. EM504750723US, and I request that the MAILING DATE will be accepted as the FILING DATE for the enclosed application.

MAILING (FILING) DATE: 3-1-2002

Signed by Samuel Shiber on 3-1-2002

365 Kearney Cr., Manchester, NH 03104, Ph: 603/644-1773 FAX: 603/644-1776